

# ONE PLAN

for all Children and Young  
People in Gloucestershire

2024-2030



# Foreword

“ Hey, as young people we have faced many new challenges, from growing up in a digital world where we have been exposed to harm and bullying, to being in lockdown and a cost of living crisis. We also know we are failing our planet. And we're worried about our future.

It's important for us to be a part of the bigger conversations in regards to our futures and our mental and physical health. And with less resources within our communities, and less communication with decision makers, it feels like our voice is getting lost.

We need services to be accessible for all. We need our voices to be heard. We need our choices to be respected.

We want an inclusive, safe, sustainable society for all, where our input is celebrated and nurtured, and we want everyone to join together to support this.

This Plan is a call to action. It's bigger than our now, it's our future.

”

*Composed by representatives of young people from Gloucestershire who contributed to shaping this Plan.*



“

We ask you to plant the trees knowing you may never lie in their shade.

”

*Arch, Ambassador for vulnerable children & young people, aged 18*

# Introduction

Gloucestershire is a diverse county, rich in natural resources and steeped in history. We aspire to make the most of our many assets and be a county of opportunity, where people are healthy, resilient, prosperous and connected within communities and environments that nurture.

This plan sets out our ambitions for all children and young people in Gloucestershire based on what they, their families and professionals told us were their experiences and priorities.

The One Plan for Children and Young People in Gloucestershire has been developed with input from many and presents a vision and set of common activities to achieve that vision. Essentially, we asked the question, how do we become a county in which all children and young people thrive and can go onto live lives of choice and opportunity?

This is particularly relevant as the data and feedback from our children, young people, families, and communities shows us that, whilst our headline data is often good when compared with national data and sometimes our peer local authorities, it does not tell the same story for those who face the greatest disadvantage and barriers, protected characteristics, isolation and the intersection of these.

Our vision became:

**A great place to grow up where children and young people thrive and live lives of choice and opportunity**

To achieve our vision we commit to four objectives:

- **Equity** – close the gap and eliminate inequalities
- **Access** – right help at the right time for all children
- **Inclusion** – a county where everyone belongs and we celebrate diversity
- **Quality** – effective, outstanding services.

To achieve these objectives, we have developed the three Pillars outlined below, all connected by a foundation of Living Well. Each has their own set of priorities that will enable us to deliver our objectives, and ultimately, our vision. These recognise the rights of every child as they grow and develop. They recognise the primacy of the family, the importance of our communities, and the critical role played by universal services in ensuring children and young people are afforded the health, education, safety, nurture, and freedoms we would want for our own children:

- **Starting well** – pre-birth through early years to reception age
- **Growing well** – primary through to early secondary
- **Being well** – middle teenage through post 16 to 25 years
- **Living well** – creating the conditions to thrive.

Through our established partnership, the Children's Coalition for Gloucestershire, we will deliver this shared strategy and take responsibility for holding the system to account to achieve its objectives. It is what we do, how we act and how we influence that will be key to the experience of our families and to children achieving their potential.



# What you've told us you'd like for all children in Gloucestershire

We recognise that our county does not look the same and is not experienced in the same way by all. Reference has already been made to those facing disadvantage but equally, the contrast between urban and rural parts of the county, as well as differences between communities who share interests, those with protected characteristics (such as sexual orientation or religion), and how these factors connect and cross over, all impacts how our county is experienced and delivered for children and young people. How is it, for example, to be a newly arrived family in Cirencester, as compared to the same family arriving in Gloucester City? Are they able to access high quality health, education, social care and community support, and how do they find out about it in the first place?



We have brought together the views of parents, children and young people through listening events hosted by partners, including Healthwatch, Future Me and the Parent Carer Forum, and by research agencies such as ICE Creates and Shared Intelligence. We've summarised these key messages here.

- More opportunities to engage with nature and enjoy our surroundings green spaces.
- Affordable childcare.
- Recording systems that enable timely and swift data sharing and referrals between services.

Easier ways to contact services and be referred, shorter waiting times and tailored support while waiting and on next steps.

**"Waiting lists are long... I have been seeking support for at least 4 years... I am struggling to find the energy to fight all the time."**

parent

Never experiencing prejudice, racism or discrimination from services which are there to help.

**"There is a bias where a black woman is seen as strong and if you speak up or get upset you are perceived as this angry black woman, but you're just supporting your child."**

parent

Opportunities to socialise and make friends in a safe and welcoming environment outside school and be active in their community.

**"More hubs for youngster and then outreach to get the information out there digitally (Instagram and TikTok)."**

parent

- Feeling listened to, taken seriously and respected by professionals, such as teachers and health professionals.
- Professionals use language that can easily be understood by young people.

Reliable, regular, affordable and safe public transport, which gets people to where they need to go such as college.

**"Services are too far away from where we live. I can't drive because of my epilepsy so my child cannot attend certain events."**

parent

**"Cirencester College is a three-hour round trip for Gloucester but many (asylum seeking young people) have to attend this college instead of their local college. This means they wake up very early and don't get home until late – it is not fair."**

professional working with asylum seekers

- Easier processes and clearer communication to help with Education Health and Care Needs Assessments and their outcome.

Sufficient and inclusive education and childcare places that support children with additional needs effectively, including children with Special Educational Needs and Disabilities.

**"We are struggling with home educating our child, but are not yet able to find a school that is suitable."**

parent

Help with transitions from early years to primary, primary to secondary and then into further education, training and employment, especially those with Special Educational Needs and Disabilities (SEND) and asylum seeking children.

**"Feel as though we've hit a brick wall as no other services offered/continued/involved. Very concerned about transition to adulthood which isn't far away."**

parent

Feeling safe when out and about from anti-social behaviour, serious violence and around busy roads.

**"Don't feel safe - kids hanging outside shops and there have been weapons in area. Don't feel safe to go to park."**

child, aged 9

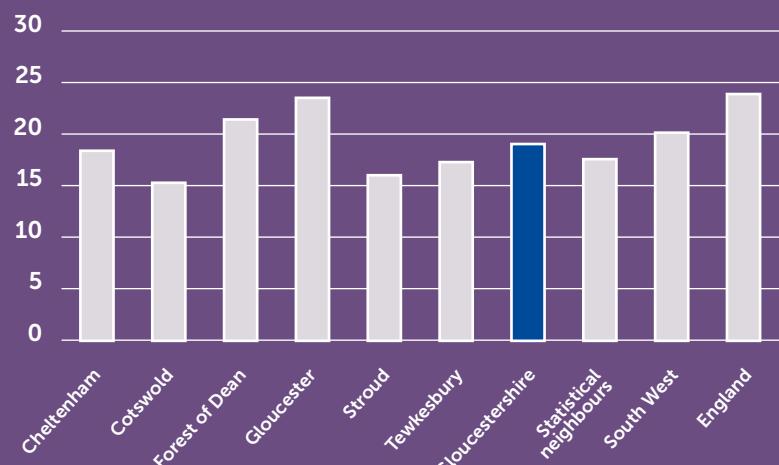
- Help to find work-experience and local employment opportunities, including more 'modern' career options (such as social media).
- Flexibility and understanding across services so young people can manage competing needs of health, education and care appointments.
- More early intervention to stop needs increasing.
- Better promotion of services that are available in their own local area and involve young people in the design and creation so it appeals to them.

# What it's like to be a child in Gloucestershire

Gloucestershire has a population of 646,627, living within the two urban centres of Gloucester and Cheltenham and the many market towns and rural villages, covered by six district authorities. Children aged 0-17 make up 20% of the population and a further 7% are aged 18-24 years.

The proportion of children living in child poverty generally fall below England averages, however rates have been increasing over time in line with the national trend, with a sharp increase observed in 2022.

## Proportion of primary pupils eligible for free school meals 2023



Children that go to school in Gloucestershire generally perform similar or better than England overall in their assessments at the end of their Reception year, Key Stage 2 and Key Stage 4. However inequalities exist, with the gap in performance between those eligible for Free School Meals and those not, consistently being greater for Gloucestershire than England as a whole.



Gloucestershire's population is becoming more ethnically diverse, although it is less diverse than England as a whole:

Percentage includes all ethnic groups excluding 'White British'	Gloucestershire	National
Total population ONS Census 2021	13.0%	28.6%
CYP ONS Census 2021	0-17yrs 16.6% 0-24yrs 15.7%	0-17yrs 32.1% 0-24yrs 31.9%

Our Pupil Wellbeing Survey found that 70.1% of young people identified themselves as heterosexual, which has reduced over time. In 2022 we asked pupils about their gender identity for the first time:



**1.1%**  
identified as transgender  
(1.5% of biological females and 0.7% of biological males)



**1.5%**  
identified as gender-fluid



**1.6%**  
identified as non-binary

## Education

- 606 Early Years settings (91.4% good or outstanding) (June 2024)
- 244 primary schools
- 41 secondary schools
- 20 special schools (including 8 independent special schools)
- 3 alternative provision schools
- 4 further education colleges (including South Gloucestershire and Stroud College)
- Up take of free 2-year-old early education and childcare for eligible families in 2023 70.1%..



**6,138**  
new births in 2021

although the number of births fluctuates over time, the general trend is starting to decline.

Reception - Early Years Foundation Stage	Gloucestershire	England
Overall % meeting expected level	67.8% (all pupils)	67.2% (all pupils)
% of children with SEN achieving 'good level of development'	EHCP 5.2% SEN 21.7%	EHCP 3.8% SEN 24.3%
Gap between FSM and no FSM	47.8% vs. 71.2% - 23.4 percentage points	51.6% vs. 71.5% - 19.9 percentage points

KS2 – expected standard in Reading, Writing and Maths	Gloucestershire	England
Overall % meeting expected level	58.0%	60.0%
Gap between SEN and no SEN	EHCP 10% vs. 71.0% - 61 percentage points SEN 19.0% vs. 71.0% - 52 percentage points	EHCP 8% vs. 70.0% - 62 percentage points SEN 24.0% vs. 70% - 46 percentage points
Gap between FSM and no FSM	36.0% vs. 64.0% - 28 percentage points	44.0% vs. 66.0% - 22 percentage points

KS4 – Average Attainment 8	Gloucestershire	England
Overall Average Attainment 8	49.9	44.6
Gap between SEN and no SEN	EHCP 13.4 vs. 53.6 – 42 percentage points SEN 33.5 vs. 53.6 – 20.1 percentage points	EHCP 14.0 vs. 50.1 – 36.1 percentage points SEN 33.2 vs. 50.1 – 16.9 percentage points
Gap between FSM and no FSM	34.2 vs. 52.7 - 18.5 points	34.8 vs. 49.7 - 14.9 points

(SEN – Special Educational Needs)

Looking at educational outcomes by ethnic groups does not show a consistent pattern, and changes through the stages due to a complex mix of cultural differences, international migration patterns, and children travelling into the county from neighbouring areas for secondary school, amongst others. Asian pupils perform best at Key Stage 2 and Key Stage 4 in Gloucestershire and in England as a whole. In Key Stage 2 the proportion of Black and Other Ethnicity in Gloucestershire achieving the expected level is below the average for the county and below our statistical neighbours and England. In Key Stage 4 all ethnic group categories perform better than their statistical neighbour and England counterparts.

Before the pandemic, around 10% of pupils across all schools were persistently absent (missing 10% or more sessions), in 2022/23 Gloucestershire reported 20% persistent absence, this pattern is similar to that seen nationally. Rates of Electively Home Educated (EHE) children have been rising in Gloucestershire as seen nationally. In Gloucestershire they have risen from 13 per 1,000 CYP aged 5-15 in 2017/18 to 25.6 per 1,000 in 2022/23. The rate of EHE in Gloucestershire in 2021/22 was significantly higher than the statistical neighbour, regional and England average.

Families do not always provide a reason for choosing Elective Home Education; however, where they have provided a reason the most common were Philosophical / Lifestyle / Preferential (19%), Mental Health (19%) and Dissatisfaction with School (combined bullying, SEND, and general dissatisfaction with school - 10%). These proportions are similar to those in our statistical neighbours and the South West region.

**Key:**

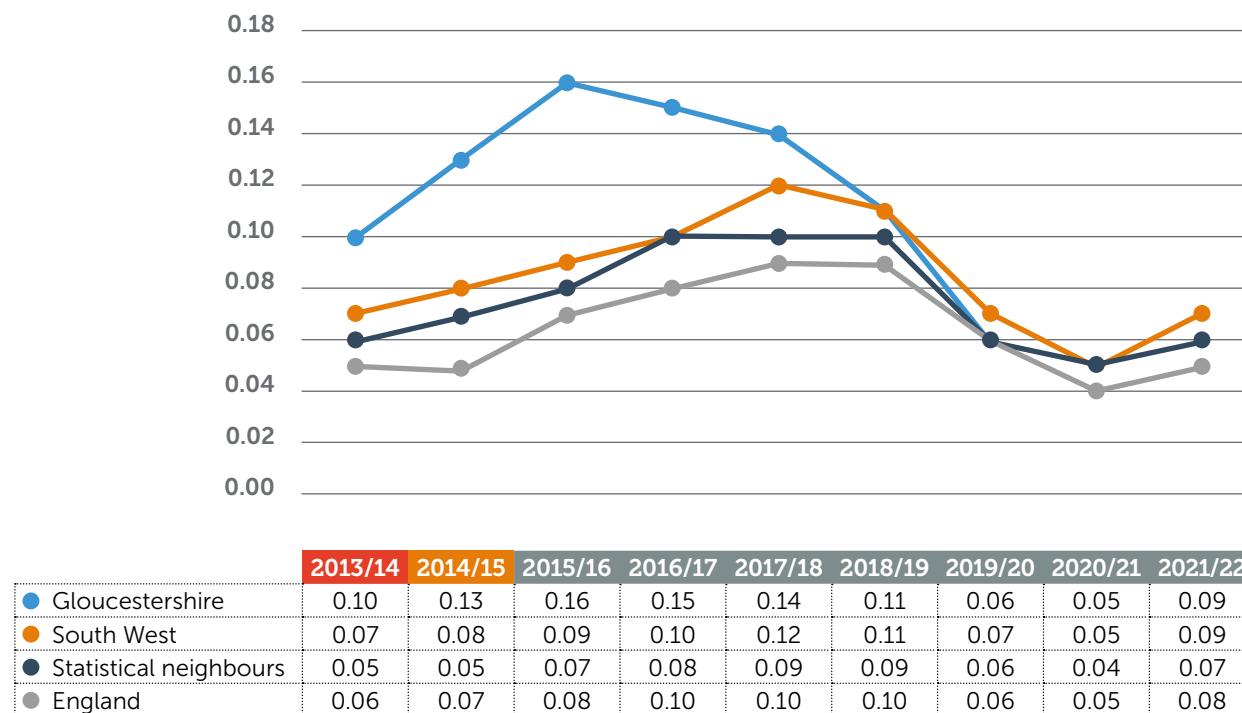
SEN - Special Educational Needs

FSM - Free School Meals

EHCP - Education, Health and Care Plan

Permanent exclusions across all school phases were historically high in Gloucestershire but started to decline in 2015/16 and fell into line with national proportions. A sharp increase was then observed nationally following the pandemic. Exclusion rates in primary age pupils, though low (0.05 in 2021/22) are currently above England (0.02) and Statistical Neighbour averages (0.01) and require monitoring.

#### Total permanent exclusions - % of school population



School suspensions in Gloucestershire have followed a similar trend to England and our Statistical Neighbours, with the most recent data putting us below the national and neighbour rate (6% compared to 7% in 2021/22). Proportion of young people aged 16 to 24 not in education, employment or training (NEET) is lower for Gloucestershire than the England average (2.4% vs. 2.8% in 2023).

## Special Educational Needs and Disabilities

The number of children and young people in Gloucestershire identified with a Special Educational Need or Disability (SEND) has been increasing since 2015 in line with national trends. This has been driven by a combination of increased need, awareness, diagnosis, training, and changes to policy. In January 2023 there were:

- 12,569 children with SEN supported in schools
- 5,295 of these are children with an Education Health & Care Plan (EHCP)
- And 525 of these are children with a complex disability.

This rise has coincided with a rise in Education Health and Care Needs Assessment applications, appeals to the needs assessment outcome and a rise in demand for special school places.

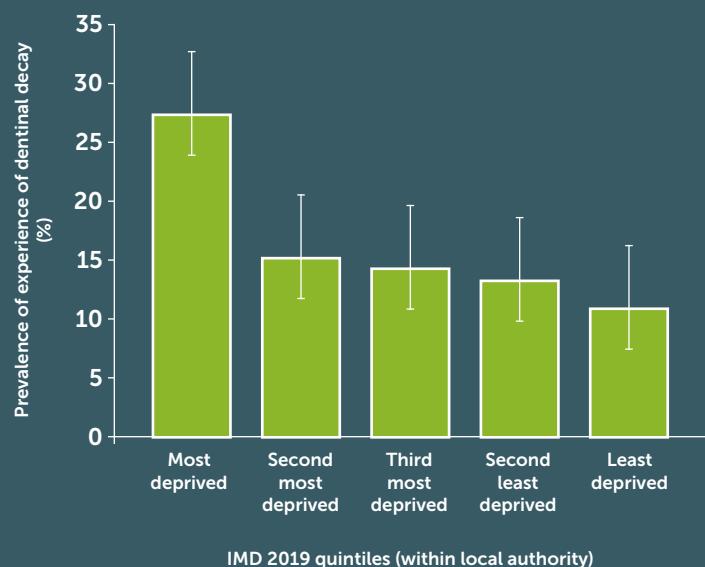
Overall Special Educational Needs are more common in children living in more deprived areas, a pattern seen locally and nationally, though there is variation depending on primary need. Children and young people with a primary need of Moderate Learning Disability; Social, Emotional and Mental Health; and Speech, Language & Communication Needs are significantly more likely to live in areas of deprivation (quintiles 1 and 2) than children without Special Educational Needs.

Deprivation quintile	SEN	No SEN
Q1 most deprived	13.2	8.5
Q2	15.4	10.2
Q3	23.7	21.4
Q4	22.5	23.9
Q5 least deprived	21.4	30.5
Unmatched	3.7	5.5

# Health

Overall Gloucestershire tends to perform well against England averages for indicators such as levels of immunisation, breastfeeding rates and oral health, however these mask disparities that exist based on deprivation and ethnicity. For example, the proportion of 5 year olds experiencing dental decay in Gloucestershire is significantly lower than the England average (16.8%) however the prevalence in the most deprived areas of Gloucestershire is almost three times higher than in the least deprived.

**Figure 3: Prevalence of experience of dentinal decay in 5 year olds in Gloucestershire, by local authority Index of Multiple Deprivation (IMD) 2019 quintiles.**



Note: error bars represent 95% confidence limits.



Benchmarking data shows that we have a higher proportion of admissions to hospital for some childhood illnesses and injuries, this needs further investigation but is in part due to hospital policies on when to admit children and the way data is coded.

Obesity affects 1 in 5 children in year 6 and is a major public health concern. Nationally, the prevalence of obesity among children living in the most deprived neighbourhoods continues to be more than double that of those in the least deprived areas. There are also ethnic differences with rates highest amongst Black children and lowest for Chinese children.

Positively, the Pupil Wellbeing Survey 2022<sup>1</sup> has found that the amount of exercise young people are doing has been increasing steadily since 2018, improvements were also seen in healthy eating habits with an increase in the proportion eating 5 a day and a reduction in sugary and energy drink consumption.

The proportion of pupils reporting drinking alcohol has also been steadily declining, and the proportion reporting trying illegal drugs fell between 2020 and 2022. The proportion of pupils reporting that the relationships and sex education they have received has been helpful had increased and the majority of young people who reported having intercourse reported they used a condom.



## Teenage conception

**9.2 per 1,000**  
vs.  
**13.1** Eng 2021

## Mental Health

Mental wellbeing in school age children is declining.

Mean WEMWBS score - all pupils



The Pupil Wellbeing Survey responses demonstrate that those in minority ethnic groups and those in areas of deprivation report finding it harder to access mental health support. In addition referrals to Child and Adolescent Mental Health Services (CAMHS) are disproportionately higher for the White British ethnic group.

## Care and safety

The number of cases open to children's social care in Gloucestershire has been higher than peers but in recent years has started to reduce and we are becoming more in line with our peers, from 2022 to 2023 there were 331.9 per 10,000 children open to social care compared to 303.79 for our statistical neighbours and 311.9 across the South West region.

We have observed a steady increase in referrals for early help and targeted support in recent years, which in part reflects earlier intervention to prevent children escalating to social care. In July 2024 there were 10,101 children open on a My Plan or My Plan Plus, of these 80% were notified by education or early years settings, 13% to Gloucestershire County Council services such as Families First and the Education Inclusion Team, 5% to children and family centres and 1% to a combination of health agencies and the voluntary and community sector.

First time entrants to Youth Justice System are below the England average at 80.4 per 100,000 vs. 148.8. While White children are underrepresented in the offending population, mixed heritage children are the most over-represented at 15% despite only making up 5% of the total 10-17 year old population in Gloucestershire. Using the term 'child' in this context is particularly important to emphasise their relative vulnerability, rights and needs and avoid 'adultification'.

In the Pupil Wellbeing Survey 7.1% reported carrying a weapon. The highest reported level of carrying a weapon (10.4%) was in independent schools, this was significantly higher than the county average. Pupils at Selective schools were significantly less likely to report carrying a weapon. The percentage reporting carrying a weapon has been fairly consistent over time. Of these 63.3% report carrying a bladed weapon.



First time entrants to Youth Justice System

**80.4 per 100,000**

vs.

**148.8 Eng.**

## Emerging concerns

Despite the numbers reporting smoking cigarettes declining over recent years, 2022 saw a huge rise in young people vaping, meaning overall exposure to nicotine rose by 42% between 2020 and 2022.

The Pupil Wellbeing Survey has also highlighted a reduction in the proportion of pupils reporting they get the recommended number of hours sleep per night,

from  
**60.7%** to  
in 2018      in 2022

This is coupled with an increase in the proportion of pupils reporting they used the Internet, gaming, social network and texting between going to bed and going to sleep.



# What do we want for all children and young people in Gloucestershire?

We believe Gloucestershire should be a great place to grow up where all children and young people can thrive and live lives of choice and opportunity, no matter of where they live, their ethnic background, sexuality, gender identity, special educational needs or disability. Bringing together the insight from young people and families, as well as what the data tells us, has led us to identify four objectives to deliver our vision:

## A great place to grow up where children and young people thrive and live lives of choice and opportunity



Objective 1

### Equity

**close the gap and eliminate inequalities**

Our data tells us people who have the least in Gloucestershire struggle more than they would in other parts of the country. The reasons for this require further investigation but are likely to include higher costs of living, challenges due to Gloucestershire's rural geography, and a focus on average population outcomes rather than incentives to target children falling behind. We must work together to create the conditions for children to thrive and target our resources where they are most needed.



Objective 2

### Access

**right help at the right time for all children**

Young people and their families tell us the right support isn't always there when they need it. We acknowledge that services are under strain and need to invest in innovative approaches to improve efficiency, early identification of needs and build independence.



Objective 3

### Inclusion

**a county where everyone belongs and we celebrate diversity**

We know we have more to do to create an inclusive society, that values and respects people regardless of their age, cultures, religion, ethnicity, gender, sexuality or disabilities. For example, our data shows us some ethnic groups are more likely to experience poor outcomes and this may in part be due to unconscious bias and prejudice. We must build a workforce that has inclusion at its core.



Objective 4

### Quality

**effective, outstanding services**

Whilst in the main our services perform well, it is essential that we maintain standards and raise performance where this isn't the case. We must move with the times and capitalise on technology developments and innovations, as well as growing a sustainable workforce.



**Responsibility for driving progress against these objectives will be owned by Gloucestershire's Children and Young People's Coalition board and three subgroups themed around the life stages of Starting Well, Growing Well and Being Well.**

To deliver this vision we will be guided by the following principles:

### **1. We will listen**

work in partnership 'with' children, families and communities, not 'for' or 'to', build on existing children, family and community assets and aspirations, ensuring everyone can make a contribution, is respected, and that we take a whole family approach.

### **2. We will care**

build a culture within our workforce of empathy, using language that cares, acknowledging children and their parents and carers are the experts in their lives and being welcoming and inclusive for families and children of all ages, cultures, religions, ethnicities, genders, sexuality and disabilities.

### **3. We will be fair**

prioritise resources to those that need it most, ambitiously aim to reduce inequalities in outcomes and close the gap.



### **4. We will act early**

aim to reduce escalation and specialist support through early identification of needs, building resilience, using restorative approaches, and reduce trauma for children and young people.

### **5. It will feel easy**

strive to create integrated services, smooth transitions and pathways to give consistency to children and families' experience of support.

### **6. It will work well**

seek to ensure value for money with our resources, avoid duplication and inefficiency, embrace innovations and build on existing evidence-based approaches.

**We are not starting from scratch, we have fantastic foundations to build from and powerful drivers for change. We have many examples of best practice, innovation and learning that we need to continue to develop and share as a system to effect change against our objectives and improve outcomes.**

# Examples of innovation and best practice in Gloucestershire

**No Child Left Behind** is an initiative in Cheltenham, that aims to help all young people to thrive and improve the outcomes of the 4400 children and young people living in poverty. The borough council, supported by partners, led a three-year action for change project based on a different theme for every month of each year.

Due to its success the initiative has continued with a focus on local industries supporting and sponsoring community projects that help vulnerable children and their families within their own communities. At the end of each year there is an award ceremony that celebrates the achievements of children and recognises the local business who contribute.

**Video Interactive Guidance (VIG)** is a preventative, therapeutic, early intervention with a strong research evidence base in the UK and worldwide and aims to strengthen the attachment relationship between parent/carer and child through improved communication.

This offer is being piloted by Gloucestershire's Health Visiting Service and has been funded by the Integrated Care System as part of the perinatal mental health pathway.

Our work to help children and families thrive is making us think about '**The Gloucestershire Way**' - an approach used by teachers, social workers and other professionals which works with the whole family and helps to show how family members' actions impact on each other.

It is based on building a safe space to listen, share, show kindness, understand each other's feelings and perspectives and ultimately help to resolve difficulties by working together and building trust. It is based on growing research into Trauma Informed Relational Practice, Systemic Practice and Family Led Decision Making.

To help support communities to be empowered to build on the strengths and assets they have, **we have created six Integrated Locality Partnerships** across covering each of the six districts that make up Gloucestershire.

They each have wide membership from partners and communities with the aims of proactively reducing the root causes of health inequalities, improving health and wellbeing, working collectively to redesign care for people in localities and supporting them to live well at home.

Children and young people's mental health and wellbeing is a common priority and the groups continue to grow their membership, reach and impact.



## Equity

We launched '**Levelling Up Together**' in Autumn 2022 as a flexible targeted grant scheme aiming to invest into the communities in Gloucestershire falling into the top 10% 'most deprived' (according to the Index of Multiple Deprivation, 2019). Fifty-two grants have been awarded, totalling just under £1.5million, and many of our 49 Levelling Up partners support children and families facing difficult circumstances through a diverse array of initiatives.

This includes through the provision of affordable or free food (such as Hesters Way Partnership's Pantry), the recruitment of volunteers to support families and listen to children read in schools (such as Home Start North West Gloucestershire and Read with Me CIC), the creation and renovation of youth groups and leisure facilities (such as the Islamic Society of Gloucester and Gas Green Youth Club), mental health support for young people from diverse communities (such as Brendan's Bridge and TIC+), and free play and physical activity sessions (such as Sportilly and Play Gloucestershire).

More information about the Levelling Up Together partners and projects can be found here: [www.goucestershire.gov.uk/your-community/levelling-up-together](http://www.goucestershire.gov.uk/your-community/levelling-up-together)





## Inclusion

We recently launched the **Dynamic Support Register** as a way to keep a digital record of key information about children under 18 with a diagnosed learning disability or autism who are at risk of going to hospital and may behave in a way that professionals may find challenging and/or complex to manage.

The key information helps professionals understand how best to help, ensure young people are treated with dignity and respect, and help to get them back home as smoothly and safely as possible.



## Access

In September 2024 we'll be launching a new **ADHD and Autism assessment pathway**. Schools and early years settings will be able to refer to a single team that are able to assess for Autism, ADHD or a combination. Additional investment from the NHS Integrated Care Board will enable more assessments to be made and reduce waiting times.

There's more information on this new webpage Support a child's neurodiversity - [Gloucestershire \(support-child-neurodiversity-southwest.nhs.uk\)](https://www.glos.nhs.uk/children-and-young-people/young-minds-matter/)

**The Mental Health Support Teams in Gloucestershire**, locally known as Young Minds Matter (YMM) first launched in 2019.

There are now 7 teams across the county, supporting young people from 5-18 in over 140 schools, with low level anxiety and low mood through cognitive behavioural therapy (CBT) interventions.

The teams work closely with the wider MH system, including TIC+, School Nursing, Early Help and Education Inclusion to ensure young people get the right support for their needs. The teams have now supported over 4500 young people and are the best performing team within the South West. This year the team are expanding their offer to work with adolescents who are struggling to engage with education with an enhanced offer of high-intensity CBT from a senior clinician within the team.





## Quality

Gloucestershire Education Forum was formed in April 2022 to bring key systems leaders in the local education system together to consider issues important to and impacting the local education system and how we can work together and share best practice to respond and improve outcomes for children. It has secured funding to improve educational outcomes for disadvantaged children and shown the difference that can be made:

- 16 schools in South Cotswolds (primary and secondary) in a Year of Reading project;
- 15 Gloucester City secondary schools Attendance project;
- 42 Gloucester Schools Partnership focused on word power project;
- 22 Diocese of Gloucester Academy Trust schools focused on social prescribing approaches to improving attendance;
- Stroud schools project to identify the features of their schools that is supporting improved attainment trends for disadvantaged children and young people;
- Study visits and seminars on supporting SEND in the mainstream classroom.

Many of the photos used in this Plan were taken at the **Holiday Activities and Food** programme celebration festival in the summer of 2024. This programme, funded by the Department for Education, with £1.9 million additional funding from Gloucestershire County Council, has awarded grants to almost 100 local voluntary, community, faith and social enterprise agencies and District Councils to provide free activities and nutritious food for children and young people during the holidays, with a focus on those facing greater disadvantage. The programme has been a huge success delivering over 150,000 activity sessions, with over 27,000 unique children and young people attending from across Gloucestershire since it was first piloted in 2021.

Building on the national **Healthy Schools initiative** launched over two decades ago, we developed Gloucestershire Healthy Living and Learning, which continues to thrive and provide support to all schools in the county.

The team of Lead Teachers (qualified teachers working in Gloucestershire who are employed as Lead Teachers one day per week) support a group of schools to achieve their Healthy Schools Award, as well as developing teaching resources, delivering training and advising on evidence based interventions schools can use to support pupil's health and wellbeing and improve the school environment.



# National Policy Direction

**It is also key that our focus locally responds to the national policy direction, including:**

- Greater access to early education and childcare, particularly for working families
- Providing a universal offer to all families that supports parents and carers to nurture the health and development of their babies and children from conception, throughout the early years, and into the start of adulthood through a Family Hubs approach
- Earlier intervention and support for children with Special Educational Needs and Disabilities to enable them to access and thrive in mainstream provision where possible and improving transitions to adulthood by strengthening Post 16 advice, guidance and provision
- Putting lifelong loving relationships at the heart of the care system by recognising that families are the experts in their own lives and the system needs to collaborate and co-produce plans in true partnership with parents and carers, whilst providing intensive help to families in crisis
- Safer, more equitable and more personalised maternity and neonatal care for women and babies
- Prevent crime before it occurs and build safety and security by working closely with communities, schools and other partners, build trust in neighbourhoods and understand local needs, with a diverse and skilled police workforce.



# Our priorities for all children and young people in Gloucestershire

## Starting well

(pre-birth through early years to reception age)

- Best Start Offer
- Positive parenting, attachment and parental mental health
- Early education and childcare
- Transition to school
- Healthy behaviours

## Growing well

(primary through to early secondary)

- Wellbeing and resilience
- Holiday and out of school activities
- School attendance
- Transition to secondary
- Online safety
- Healthy behaviours

## Being well

(middle teenage through post 16 to 25 years)

- Transition to independence
- Transition to adult's services
- Youth offer
- Healthy relationships
- Travel
- Young people's voice

## Joint priorities

- Use the Graduated Approach to effectively respond and prevent needs escalating
- Create a Family Hubs eco-system
- Develop a sustainable and empathetic workforce
- Recognise and respond to experiences of adversity and trauma

## Living well (creating the conditions to thrive)

- Quality housing and employment opportunities
- Affordable transport that gets us where we need to go
- Safe communities and online spaces

# How we will measure our success



## Equity

### Equity

- The attainment gap for children eligible for Free School Meals and those with Special Educational Needs and Disabilities will narrow
- Uptake of free 2-year-old childcare for low income families will increase
- The number of children open to social care will reduce.



## Access

### Access

- Children will tell us they feel safe
- Waiting lists for specialist services will reduce
- The use of Family Hubs by underserved communities will increase
- More effective transport for children to access school will be established.



## Inclusion

### Inclusion

- School attendance will increase
- Exclusions, deferred entry to school and placement moves will reduce
- Families becoming Electively Home Educated for reasons other than philosophical / lifestyle / preferential will reduce.
- Reported bullying will reduce.



## Quality

### Quality

- There will be sufficient early years provision at good or outstanding Ofsted standard
- The quality of Education, Health and Care Plans for those children who need them will increase and the number of tribunals will reduce.



# How we will deliver our One Plan for all Children and Young People in Gloucestershire

Gloucestershire's Children and Young People's Coalition board will oversee the delivery of this strategy and will hold partners to account in delivering our priorities.

The coalition is rooted in Section 10 of the 2004 Children's Act which gives responsibility to Gloucestershire County Council to co-ordinate partner activity for securing the health and wellbeing of all children and young people in Gloucestershire.

The Coalition reports to the One Gloucestershire Health and Wellbeing Board and Partnership, and the One Plan aligns to the Integrated Care Strategy and Joint Health and Wellbeing Strategy.

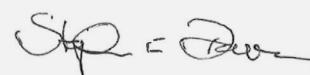
The coalition sits alongside the Gloucestershire Safeguarding Children Partnership, with its focus on the effectiveness of multi-agency safeguarding arrangements across the county, the Safer Gloucestershire Partnership Board, and the Children's Ambitions Board, which drives the continuous improvement in children's social care. The coalition will take ownership and responsibility for delivering the 'Living Well' foundation to this Plan.

Three sub-groups report into the coalition board to drive forward the Starting Well, Growing Well and Being Well priorities of the One Plan.

Coalition members commit to ensuring alignment and advocating for the interests of children and young people throughout the system, including, but not limited to, district plans; voluntary, community, faith and social enterprise sectors; equality, diversity and inclusion strategy; strategic housing partnership; anchors and economic strategy; domestic abuse, early help, SEND and inclusion strategies.

Progress against our priorities and outcomes for children and young people will be evaluated on an annual basis and will inform an annual review of the strategy for its lifetime. This will also enable partners to continue to hold each other to account for delivering improved outcomes for our children and young people.

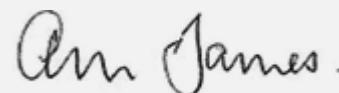
**Stephen Davies**  
Leader of the council  
(GCC)



**Cllr Paul McLain**  
Lead Cabinet Member for  
Children's Safeguarding  
(GCC)



**Ann James**  
Executive Director of  
Children's Services  
(GCC)



**Dame Gill Morgan**  
Chair NHS Gloucestershire / ICS  
(ICB)



**Matt Lennard**  
Chief Executive Officer  
(Gloucestershire VCS Alliance)



**Nick Evans**  
Deputy Police and  
Crime Commissioner  
(OPCC)



**Steve Bean**  
Head of Public Protection  
(Gloucestershire Constabulary)



**Dame Janet Trotter**  
Chair of the Gloucestershire Children  
and Young People's Wellbeing Coalition  
(GCC)

